Data Submission

DCI Number: GDCI-128922-1549

Data Call-In Information	
Company Name	**SHARDA CROPCHEM LIMITED**
Company Address	**P.O. Box 640 HOCKESSIN, DE 19707**
DCI Type	**Generic**
Issued Date	**09/18/2015**
90-Day Response Deadline	**12/27/2015**
CRM Information	**St. Clair, Katherine**
Chemical Name	**Imazethapyr**
Chemical Number	**128922**

Data Submission Information	
Tracking Number	**CDX_DCI_2016_000308**

DCI Level Documents

File Name	File Type	MRID	CBI	Submitted Date
Cover Ltr.pdf	Submission Cover Letter	N.A.	N	09/20/2016

EPA Product Registration Number(s)

82633-23	

EPA Product Registration Documents: 82633-23

File Name	File Type	MRID	CBI	Submitted Date
82633-23 - Basic CSF - 18Dec2014.pdf	Form 8570-4 Confidential Statement of Formula	N.A.	Y	09/20/2016
Offer to Pay letters 14Jan2015.pdf	General Correspondences	N.A.	N	09/20/2016
Offer to Cost Share 8570-32.pdf	General Correspondences	N.A.	N	09/20/2016
Certification Statement EPA Form 8570-34.pdf	General Correspondences	N.A.	N	09/20/2016
SHARDA GDCI-128922-1549 Imazetl Cover Letter and Attachments 24.pdf	General Correspondences	N.A.	N	09/20/2016
SHARDA GDCI-128922-1549 Imazetl Cover Letter and Attachments 23.pdf	General Correspondences	N.A.	N	09/20/2016

Agent letter 4Nov2010.pdf	**Company Letter**	**N.A.**	**N**	**09/20/2016**
SHARDA GDCI-128922-1549 Imazetl Cover Letter and Attachments 22.pdf	**General Correspondences**	**N.A.**	**N**	**09/20/2016**
EPA app form.pdf	**General Correspondences**	**N.A.**	**N**	**09/20/2016**

Guideline Requirement Number(s)	
Guideline Requirement Number - 850.3020	
Study Title	**Honey bee acute contact toxicity**
Protocol	**N**
Target Submission Date	**09/18/2016**
Use Pattern	**T; A; C**
Test Substance	**TGAI**
Time Frame	**12 month(s)**
Footnote(s)	**2. USEPA. 2012a. "Honey Bee Acute Contact Toxicity" Ecological Effects Test Guidelines OCSPP 850.3020. EPA 712-C-019 Web: http://www.regulations.gov/#!documentDetail;D=EPA-HQ-OPPT-2009-0154-0016** **3. To be conducted with imazethapyr TGAI or imazethapyr ammonium salt TGAI.** **10. Study is to be conducted with adult worker bees.** **14. See also OECD 214: OECD.1998b. OECD Guidelines for the Testing of Chemicals. Test Number 214, Acute Contact Toxicity Test. http://www.oecd-ilibrary.org/environment/test-no-214-honey bees-acute-contact-toxicity-test_9789264070189-en;jsessionid=43gvto47wnue9.delta**
Registrant Response	**N.A.**
Guideline Requirement Number - 850.3040	
Study Title	**Field testing for pollinators**
Protocol	**Y**
Target Submission Date	**09/18/2017**
Use Pattern	**T; A; C**
Test Substance	**TEP**
Time Frame	**24 month(s)**

Footnote(s)	**1. USEPA. 2012c. "Field Testing for Pollinators." Ecological Effects Test Guidelines OCSPP 850.3040. EPA 712-C-017. Web. http://www.regulations.gov/#!documentDetail;D=EPA-HQ-OPPT-2009-0154-0018** **4. To be conducted with imazethapyr TEP or imazethapyr ammonium salt TEP.** **7. The need for a field test for pollinators will be determined based upon lower-tiered tests and/or other lines of data and the need for a refined pollinator risk assessment.** **13. See information and guidance identified in the EPA documents, (i) USEPA. 2012. White Paper in Support of the Proposed Risk Assessment Process for Bees. Submitted to the FIFRA Scientific Advisory Panel for Review and Comment September 11 - 14, 2012. Office of Chemical Safety and Pollution Prevention Office of Pesticide Programs Environmental Fate and Effects Division, Environmental Protection Agency, Washington DC; Environmental Assessment Directorate, Pest Management Regulatory Agency, Health Canada, Ottawa, CN; California Department of Pesticide Regulation http://www.regulations.gov/#!documentDetail;D=EPA-HQ-OPP-2012-0543-0004; (ii) 2014 Guidance for Assessing Pesticide Risks to Bees. Office of Pesticide Programs United States Environmental Protection Agency, Health Canada Pest Management Regulatory Agency, California Department of Pesticide Regulation. June 19, 2014. http://www2.epa.gov/sites/production/files/2014-06/documents/pollinator_risk_assessment_guidance_06_19_14.pdf** **25. A study protocol must be submitted to and reviewed by EPA prior to study initiation. The draft protocol must be submitted to the Agency within 90 days of receipt of this DCI.**
Registrant Response	**N.A.**
Guideline Requirement Number - 850.4100	
Study Title	**Seedling Emergence and Seedling Growth**
Protocol	**N**
Target Submission Date	**09/18/2016**
Use Pattern	**T; A; C**
Test Substance	**TEP**
Time Frame	**12 month(s)**
Footnote(s)	**5. To be conducted with imazethapyr TEP and imazethapyr ammonium salt TEP.** **23. Data are required for six species of dicots from at least four families, one species of which is soybean (Glycine max). Data are required for four species of monocots from at least two families, one species which is corn (Zea mays). At least one of either the monocot or dicot species must be a root crop.** **27. A Tier II study is required. A Tier I plant study may be conducted in lieu of a Tier II study with the understanding that any adverse effects observed by the Tier I study would necessitate conduct and submission of a Tier II study as well. The purpose of a Tier II study is to establish both a definitive No Observed Adverse Effect Concentration (NOAEC), or alternatively, a concentration at which there is a 5% observed inhibition effect (IC05), to be used in a risk assessment and effects determination for endangered or threatened species (listed species), and a definitive IC25 (concentration at which there is a 25% observed inhibition effect) for assessing risk to non-listed nontarget plants. If any adverse effects are observed in a Tier I study and neither a definitive NOAEC nor a definitive IC05 value is available, then the Agency may have to presume in its effects determination, that imazethapyr "may affect" and is "likely to adversely affect" listed plant species.**
Registrant Response	**N.A.**
Guideline Requirement Number - 850.4150	
Study Title	**Vegetative Vigor**
Protocol	**N**

Target Submission Date	**09/18/2016**
Use Pattern	**T; A; C**
Test Substance	**TEP**
Time Frame	**12 month(s)**
Footnote(s)	**5. To be conducted with imazethapyr TEP and imazethapyr ammonium salt TEP. 23. Data are required for six species of dicots from at least four families, one species of which is soybean (Glycine max). Data are required for four species of monocots from at least two families, one species which is corn (Zea mays). At least one of either the monocot or dicot species must be a root crop. 27. A Tier II study is required. A Tier I plant study may be conducted in lieu of a Tier II study with the understanding that any adverse effects observed by the Tier I study would necessitate conduct and submission of a Tier II study as well. The purpose of a Tier II study is to establish both a definitive No Observed Adverse Effect Concentration (NOAEC), or alternatively, a concentration at which there is a 5% observed inhibition effect (IC05), to be used in a risk assessment and effects determination for endangered or threatened species (listed species), and a definitive IC25 (concentration at which there is a 25% observed inhibition effect) for assessing risk to non-listed nontarget plants. If any adverse effects are observed in a Tier I study and neither a definitive NOAEC nor a definitive IC05 value is available, then the Agency may have to presume in its effects determination, that imazethapyr "may affect" and is "likely to adversely affect" listed plant species.**
Registrant Response	**N.A.**
Guideline Requirement Number - 850.4400	
Study Title	**Aquatic Plant Toxicity Using Lemna spp**
Protocol	**N**
Target Submission Date	**09/18/2016**
Use Pattern	**T; A; C**
Test Substance	**COMMENT**
Time Frame	**12 month(s)**
Footnote(s)	**11. Study is required to be conducted using the degradate CL266858 as the test substance. 24. Data are required for a duckweed species. 26. A Tier II study is required. A Tier I plant study may be conducted in lieu of a Tier II study with the understanding that any adverse effects observed by the Tier I study would necessitate conduct and submission of a Tier II study as well. The purpose of a Tier II study is to establish both a definitive No Observed Adverse Effect Concentration (NOAEC), or alternatively, a concentration at which there is a 5% observed inhibition effect (IC05), to be used in a risk assessment and effects determination for endangered or threatened species (listed species), and a definitive IC50 (concentration at which there is a 50% observed inhibition effect) for assessing risk to non-listed nontarget plants. If any adverse effects are observed in a Tier I study and neither a definitive NOAEC nor a definitive IC05 value is available, then the Agency may have to presume in its effects determination, that imazethapyr "may affect" and is "likely to adversely affect" listed plant species.**
Registrant Response	**N.A.**
Guideline Requirement Number - SS-1108	
Study Title	**Honey bee acute oral toxicity**
Protocol	**Y**

Target Submission Date	**09/18/2016**
Use Pattern	**T; A; C**
Test Substance	**TGAI**
Time Frame	**12 month(s)**
Footnote(s)	**3. To be conducted with imazethapyr TGAI or imazethapyr ammonium salt TGAI. 10. Study is to be conducted with adult worker bees. 12. See the OECD 213: OECD Guidelines for the Testing of Chemicals. Honeybees, Acute Oral Toxicity Test. 213. http://lysander.sourceoecd.org/vl=5988235/cl=12/nw=1/rpsv/cgi-bin/fulltextew.pl?prpsv=/ij/oecdjournals/1607310x/v1n2/s14/p1.idx 25. A study protocol must be submitted to and reviewed by EPA prior to study initiation. The draft protocol must be submitted to the Agency within 90 days of receipt of this DCI.**
Registrant Response	**N.A.**
Guideline Requirement Number - SS-1155	
Study Title	**Residues in Pollen and Nectar/Field Residue Analysis**
Protocol	**Y**
Target Submission Date	**09/18/2017**
Use Pattern	**T; A; C**
Test Substance	**TEP**
Time Frame	**24 month(s)**
Footnote(s)	**4. To be conducted with imazethapyr TEP or imazethapyr ammonium salt TEP. 8. The following elements should be considered when developing study protocol(s) for the monitoring of residues in pollen/nectar. - Consideration of the range of application methods and environmental conditions (e.g., soil and hydric regimes) that the target crop(s) may be under. - Consideration of the attractiveness of the selected crop to pollinators - Consideration of a collection schedule sufficient to allow for an understanding of the character of residues, in the pollen/nectar and/or plant tissues, over time. - Consideration of data sufficient to determine whether residues of the active ingredient and/or degradation product(s) accumulates in soil and is/are bioavailable for plant to uptake in a following planting, and therefore result in potential exposure to pollinators. - Consideration of the market proportion of the selected target crop(s). 18. Measurements of residues in the pollen/nectar are needed based upon lower-tiered tests and/or other lines of evidence, and the need for a refined pollinator risk assessment. 25. A study protocol must be submitted to and reviewed by EPA prior to study initiation. The draft protocol must be submitted to the Agency within 90 days of receipt of this DCI.**
Registrant Response	**N.A.**
Guideline Requirement Number - SS-1228	
Study Title	**Larval honey bee acute oral toxicity**
Protocol	**Y**
Target Submission Date	**09/18/2016**
Use Pattern	**T; A; C**
Test Substance	**TGAI**
Time Frame	**12 month(s)**

Footnote(s)	**3. To be conducted with imazethapyr TGAI or imazethapyr ammonium salt TGAI. 9. Study is to be conducted with larval worker bees. 17. OECD Test Guideline 237 may be used to develop a protocol for this study (OECD. 2013 Guidelines for Testing Chemicals. Honey bee (Apis mellifera) larval toxicity test, single exposure.) See: http://www.oecd-ilibrary.org/environment/test-no-237-honey-bee-apis-mellifera-larval-toxicity-test-single-exposure_9789264203723-en 20. In some cases, information pertaining to acute toxicity to honey bee larvae may be obtained with the chronic honey bee larvae test thereby negating the need for separate acute and chronic larval toxicity tests. 25. A study protocol must be submitted to and reviewed by EPA prior to study initiation. The draft protocol must be submitted to the Agency within 90 days of receipt of this DCI.**
Registrant Response	**N.A.**
Guideline Requirement Number - SS-1253	
Study Title	**Larval honeybee chronic oral toxicity**
Protocol	**Y**
Target Submission Date	**09/18/2016**
Use Pattern	**T; A; C**
Test Substance	**TGAI**
Time Frame	**12 month(s)**
Footnote(s)	**3. To be conducted with imazethapyr TGAI or imazethapyr ammonium salt TGAI. 9. Study is to be conducted with larval worker bees. 16. OECD has not yet finalized test guidelines for chronic studies with honey bee larvae. OECD draft guidance has is being developed, see OECD 2013b. OECD Draft Guidance Document Honey Bee (Apis mellifera) Larval Toxicity Test, Repeated Exposure. http://www.oecd.org/env/ehs/testing/Draft_GD_honeybees_rep_exp_for_2nd_CR_25_November_2013.pdf 19. In some cases, information pertaining to acute toxicity to honey bee larvae may be obtained with the chronic honey bee larvae test thereby negating the need for separate acute and chronic larval toxicity tests. A repeat dose larval toxicity study, such as that described in the 2007 OEC Guidance document on the honeybee brood test under semi-field conditions, can be used to fulfill the data requirements for both the acute and subchronic honey bee larval studies. 25. A study protocol must be submitted to and reviewed by EPA prior to study initiation. The draft protocol must be submitted to the Agency within 90 days of receipt of this DCI.**
Registrant Response	**N.A.**
Guideline Requirement Number - SS-1313	
Study Title	**Honey bee adult chronic oral toxicity**
Protocol	**Y**
Target Submission Date	**09/18/2016**
Use Pattern	**T; A; C**
Test Substance	**TGAI**
Time Frame	**12 month(s)**

Footnote(s)	**3. To be conducted with imazethapyr TGAI or imazethapyr ammonium salt TGAI. 10. Study is to be conducted with adult worker bees. 15. OECD has not yet finalized test guidelines for chronic studies, and efforts are underway to develop standardized guidelines for assessing the effects from chronic exposure to adult and larvae in the laboratory. Discussion of the study design elements for the 10-day adult toxicity test can be found in Appendix O of the European Food Safety Authority (EFSA) guidance document: EFSA. Guidance on the risk assessment of plant protection products on bees (Apis mellifera, Bombus spp. and solitary bees. EFSA Journal 2013;11(7):3295, 266 pp. doi:10.2903/j.efsa.2013.3295. Available online at: http://www.efsa.europa.eu/en/efsajournal/doc/3295.pdf 25. A study protocol must be submitted to and reviewed by EPA prior to study initiation. The draft protocol must be submitted to the Agency within 90 days of receipt of this DCI.**
Registrant Response	**N.A.**
Guideline Requirement Number - SS-1319	
Study Title	**Semi-field testing for pollinators (tunnel or colony feeding studies)**
Protocol	**Y**
Target Submission Date	**09/18/2017**
Use Pattern	**T; A; C**
Test Substance	**TEP**
Time Frame	**24 month(s)**
Footnote(s)	**4. To be conducted with imazethapyr TEP or imazethapyr ammonium salt TEP. 6. The need for a semi-field test for pollinators (i.e., either a field-feeding test or a tunnel test) will be determined based upon lower-tiered tests and/or other lines of evidence, and the need for a refined pollinator risk assessment. 21. Formal guidelines for semi-field tests do not yet exist; however, information that can help guide the development of either a semi-field tunnel test protocol can be found at OECD 75, see: OECD. 2007. Series on Testing and Assessment Number 75. Guidance document on the honey bee (Apis mellifera L.) brood test under semi-field conditions. Environmental Directorate Joint Meeting of the Chemicals Committee and the Working Party on Chemicals, Pesticides and Biotechnology. ENV/JM/MONO(2007)22. 31-Aug-2007. http://www.oecd.org/officialdocuments/publicdisplaydocumentpdf/?cote=env/jm/mono(2007)22&doclanguage=en. 22. For field-feeding studies see: Oomen et al. 1992: Oomen, P. A. A. DeRuijter and J. Van der Steen. 1992. Method for honey bee brood feeding tests with insect growth-regulating insecticides. Bul OEPP/EPPO Bulletin 22: 613 - 616. 25. A study protocol must be submitted to and reviewed by EPA prior to study initiation. The draft protocol must be submitted to the Agency within 90 days of receipt of this DCI.**
Registrant Response	**N.A.**
Submitter Information	
Submitter	**James Wagner**
Submitted Date	**09/20/2016**

SHARDA USA L.L.C.

P.O. BOX 640 ,HOCKESSIN,
DELAWARE 19707 ,USA
PHONE : OFF: 001 302 234 8550
FAX: 001 302 234 7570

November 4, 2010

Office of Pesticide Programs (7504P)
U. S. Environmental Protection Agency
1200 Pennsylvania Avenue, N.W.
Washington, DC 20460

Re: Sharda USA LLC
Company Number 83529
Designation of Agent

Dear Sir or Madam:

This letter serves as notification that Sharda USA LLC has appointed Wagner Regulatory Associates, Inc. (WRA, Inc.) to serve as its Agent on our company's behalf regarding all state and federal regulatory matters relative to all products that Sharda USA has registered or will register in future with US EPA and/or states. Please forward all correspondence for Sharda USA and its products to:

Wagner Regulatory Associates, Inc.
P.O. Box 640
Hockessin, DE 19707-0640

This appointment is effective until revoked in writing by Sharda USA. Thank you for your time and assistance. Please contact me if you have any questions.

Respectfully submitted,

Ashish R. Bubna
Director

Federal Express

September 20, 2016

Wagner Regulatory Associates, Inc.
P.O. Box 640
7217 Lancaster Pike, Suite A
Hockessin, Delaware 19707

Document Processing Desk (DCI/PRD)
ATTN: Katherine St. Clair
U.S. Environmental Protection Agency
Office of Pesticide Programs (7508P)
Room S-4900, One Potomac Yard
2777 South Crystal Drive
Arlington, Virginia 22202-4501

Dear Ms. St. Clair;

Subject: Imazethapyr Technical – EPA Registration Number 82633-23
Response to Data Call-In ID #GDCI-128922-1549

Wagner Regulatory Associates, Inc., as agent for Sharda Cropchem Limited, submits the 90-day response for the generic Data Call-In for the above referenced product containing Imazethapyr (PC code 128922). In support of this request, the following documents and reports are attached:

- Letter from Sharda Cropchem Limited appointing Wagner Regulatory Associates, Inc. as its agent
- Application for Pesticide Registration (8570-1)
- Data Call-In Response form
- Requirements Status and Registrants Response form
- Certification with Respect to Citation of Data form (8570-34)
- Confidential Statement of Formula (8570-4)
- Certification to Enter Into Agreement with Registrants for Development of Data (850-32)
- Copies of Offer to Pay letters submitted to registrants

If you need to contact me about this submission I can be reached by email and telephone as noted below. Thank you for your consideration of this request.

Respectfully submitted,

Cheryl R Wagner

Cheryl Wagner
Agent for Sharda CropChem Limited
Tel: 302-635-72890
email: cheryl@wagnerreg.com

Enclosures

Please read instructions on reverse before completing form. Form Approved. OMB No. 2070-0060. Approval expires 05-31-98

United States
Environmental Protection Agency
Washington, DC 20460

		OPP Identifier Number
	Registration	
	Amendment	
✓	**Other**	

Application for Pesticide - Section I

1. Company/Product Number	2. EPA Product Manager	3. Proposed Classification
82633-23	Heather Garvie	☒ None ☐ Restricted
4. Company/Product (Name)	**PM#**	
Imazethapyr Technical	24	

5. Name and Address of Applicant *(Include Zip Code)*

Sharda Cropchem Limited
c/o Wagner Regulatory Associates, Inc.
P.O. Box 640
Hockessin, DE 19707

☐ *Check if this is a new address*

6. **Expedited Review**. In accordance with FIFRA Section 3(c)(3)(b)(I), my product is similar or identical in composition and labeling to:
EPA Reg. No.: 42750-145 and 11603-52
Product Name: Imazethapyr TGAI and Agan Imazethapyr Technical

Section - II

☐ Amendment - Explain below.
☐ Resubmission in response to Agency letter dated _____
☐ Notification - Explain below.
☐ Final printed labels in response to Agency letter dated _____
☐ "Me Too" Application.
☑ Other - Explain below.

Explanation: Use additional page(s) if necessary. (For Section I and Section II.)

90-Day Response to GDCI ID #GDCI-128922-1549

Section - III

1. Material This Product Will Be Packaged In:

Child-Resistant Packaging	Unit Packaging	Water Soluble Packaging	2. Type of Container
☐ Yes* ☒ No	☐ Yes ☒ No	☐ Yes ☒ No	☐ Metal ☒ Plastic ☐ Glass ☐ Paper ☐ Other (Specify) HDPE lined bags
**** Certification must be submitted***	If "Yes" Unit Packaging wgt. / No. per container	If "Yes" Package wgt / No. per container	

3. Location of Net Contents Information	4. Size(s) Retail Container	5. Location of Label Directions
☒ Label ☐ Container	Bulk	☒ On Label ☐ On Labeling accompanying product

6. Manner in Which Label is Affixed to Product ☐ Lithograph ☒ Paper glued ☐ Stenciled ☐ Other ___adhesive backed label_____

Section - IV

1. Contact Point *(Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)*

Name	Title	Telephone No. (Include Area Code)
Cheryl Wagner	Agent for Sharda Cropchem Limited	(302) 635-7289

Certification

I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

6. Date Application Received **(Stamped)**

2. Signature	3. Title
Cheryl R Wagner	Agent for Sharda Cropchem Limited
4. Typed Name	**5. Date**
CHERYL WAGNER	September 20, 2016

This is a reproduction of EPA Form 8570-1 (Rev. 8-94) Previous editions are obsolete.

Form Approved OMB Nos. 2070-0060; 2070-0057; 2070-0107; 2070-0122; 2070-0164

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
1200 Pennsylvania Avenue, N.W.
WASHINGTON, D.C. 20460

Certification with Respect to Citation of Data

Applicant's/Registrant's Name, Address, and Telephone Number	EPA Registration Number/File Symbol
Sharda Cropchem Ltd., c/o Wagner Regulatory Associates, Inc. P.O.Box 640, Hockessin, DE 19707	82633-23
Active Ingredient(s) and/or representative test compound(s) Imazethapyr	Date September 20, 2016
General Use Pattern(s) (list all those claimed for this product using 40 CFR Part 158) Terrestrial Food Use	Product Name Imazethapyr Technical

NOTE: If your product is a 100% repackaging of another purchased EPA-registered product labeled for all the same uses on your label, you do not need to submit this form. You must submit the Formulator's Exemption Statement (EPA Form 8570-27).

☐ I am responding to a Data-Call-In Notice, and have included with this form a list of companies sent offers of compensation (the Data Matrix form should be used for this purpose).

SECTION I: METHOD OF DATA SUPPORT (Check one method only)

☐ I am using the cite-all method of support, and have included with this form a list of companies sent offers of compensation (the Data Matrix form should be used for this purpose).	☑ I am using the selective method of support (or cite-all option under the selective method), and have included with this form a completed list of data requirements (the Data Matrix form must be used).

SECTION II: GENERAL OFFER TO PAY

[Required if using the cite-all method or when using the cite-all option under the selective method to satisfy one or more data requirements]

☑ I hereby offer and agree to pay compensation, to other persons, with regard to the approval of this application, to the extent required by FIFRA.

SECTION III: CERTIFICATION

I certify that this application for registration, this form for reregistration, or this Data-Call-In response is supported by all data submitted or cited in the application for registration, the form for reregistration, or the Data-Call-In response. In addition, if the cite-all option or cite-all option under the selective method is indicated in Section I, this application is supported by all data in the Agency's files that (1) concern the properties or effects of this product or an identical or substantially similar product, or one or more of the ingredients in this product; and (2) is a type of data that would be required to be submitted under the data requirements in effect on the date of approval of this application if the application sought the initial registration of a product of identical or similar composition and uses .

I certify that for each exclusive use study cited in support of this registration or reregistration, that I am the original data submitter or that I have obtained the written permission of the original data submitter to cite that study.

I certify that for each study cited in support of this registration or reregistration that is not an exclusive use study, either: (a) I am the original data submitter; (b) I have obtained the permission of the original data submitter to use the study in support of this application; (c) all periods of eligibility for compensation have expired for the study; (d) the study is in the public literature; or (e) I have notified in writing the company that submitted the study and have offered (I) to pay compensation to the extent required by sections 3(c)(1)(F) and/or 3(c)(2)(B) of FIFRA; and (ii) to commence negotiations to determine the amount and terms of compensation, if any, to be paid for the use of the study.

I certify that in all instances where an offer of compensation is required, copies of all offers to pay compensation and evidence of their delivery in accordance with sections 3(c)(1)(F) and/or 3(c)(2)(B) of FIFRA are available and will be submitted to the Agency upon request. Should I fail to produce such evidence to the Agency upon request, I understand that the Agency may initiate action to deny, cancel or suspend the registration of my product in conformity with FIFRA.

I certify that the statements I have made on this form and all attachments to it are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature	Date	Typed or Printed Name and Title
	9/20/2016	Cheryl Wagner, Agent (Tel: 302-635-7289)

United States Environmental Protection Agency
Washington, D.C. 20460

CERTIFICATION OF ATTEMPT TO ENTER INTO AN AGREEMENT WITH REGISTRANTS FOR DEVELOPMENT OF DATA

Form Approved.

OMB Nos. 2070-0057; 2070-0107; 2070-0122; 2070-0164

Paperwork Reduction Act Notice: The public reporting burden for this collection of information is estimated to average 15 minutes per response including time for reading the instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to: Director, Collection Strategies Division (2822T), U.S. Environmental Protection Agency, 1200 Pennsylvania Avenue, N.W., Washington, DC 20460. Do not send the form to this address.

Please fill in blanks below

Company Name	**Company Number**
Sharda CropChem Limited	82633
Chemical Name	**EPA Chemical Number**
Imazethapyr	128922

I Certify that:

My company is willing to develop and submit the data required by EPA under the authority of the Federal Insecticide, Rodenticide and Fungicide Act (FIFRA), if necessary. However, my company would prefer to enter into an agreement with one or more registrants to develop jointly or share in the cost of developing data.

My firm has offered in writing to enter into such an agreement. That offer was irrevocable and included an offer to be bound by arbitration under section 3(c)(2)(B)(iii) of FIFRA if final agreement on all terms could not be reached otherwise. This offer was made to the following firm(s) on the following date(s):

Name of Firm(s)	**Date of Offer**
BASF Corporation	January 14, 2015
Adama Agan Ltd.	January 14, 2015
Albaugh, LLC	January 14, 2015

Certification:

I certify that I am duly authorized to represent the company name above, and that the statements that I have made on this form and all attachments therein are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature of Company's Authorized Representative	**Date**
	9/20/2016

Name and Title (Please Print or Type)

Cheryl Wagner, Agent for Sharda CropChem Limited

EPA Form 8570-32 (12-2003)

WRA

Wagner Regulatory Associates, Inc.
P.O. Box 640
7217 Lancaster Pike, Suite A
Hockessin, Delaware 19707

January 14, 2015

Albaugh Inc.
P.O. Box 2127
Valdosta, GA 31064

Re: Offer to Pay

Dear Sir or Madam:

Sharda Cropchem Ltd. is submitting a registration application to the U.S. Environmental Protection Agency ("EPA") for the product "Imazethapyr Technical" containing imazethapyr as the active ingredient. This application relies on the cite-all method of support to satisfy generic data requirements. Your company is listed on the most recent EPA "Data Submitters List" for this active ingredient.

In accordance with the Federal Insecticide, Fungicide and Rodenticide Act ("FIFRA") Section 3(c)(1)(F), Sharda Cropchem Ltd. hereby offers to pay compensation after the approval of this application, to the extent required by Section 3(c)(1)(F) for specific and valid data for which your company is identified by the EPA as an original data submitter and on which this application relies. Sharda Cropchem Ltd. offers to begin negotiations to determine which data are subject to the compensation regulations of FIFRA and the amount and terms of the compensation, if any, to be paid for any such data.

Further, if there are any studies that are in progress and that you are required to submit to EPA in response to a pending data call-in for imazethapyr, Sharda Cropchem Ltd. hereby offers to jointly develop or share in the cost of developing such studies to the extent required by FIFRA Section 3(c)(2)(B).

For each study for which EPA considers your company to be an original data submitter and for which you seek compensation, please identify the data items and any terms of compensation that you propose.

Sincerely,

James M. Wagner

James M. Wagner
Agent for Sharda Cropchem Ltd.
Telephone: 302-635-7290
Email: james@wagnerreg.com

WRA
Wagner Regulatory Associates, Inc.
P.O. Box 640
7217 Lancaster Pike, Suite A
Hockessin, Delaware 19707

January 14, 2015

Makhteshim Agan of North America, Inc.
3120 Highwoods Blvd., Suite 100
Raleigh, NC 27604

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Email: james@wagnerreg.com

WRA
Wagner Regulatory Associates, Inc.
P.O. Box 640
7217 Lancaster Pike, Suite A
Hockessin, Delaware 19707

January 14, 2015

BASF Corporation
P.O. Box 13528
26 Davis Drive
Research Triangle Park, NC 27709

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Email: james@wagnerreg.com

United States Environmental Protection Agency
Washington, D.C. 20460
DATA CALL-IN RESPONSE

OMB Approval 2070-0174
EPA FORM 6300-4

INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form.
Use additional sheet(s) if necessary.

1. Company Name and Address	2. Case # and Name	3. Date and Type of DCI and Number
SHARDA CROPCHEM LIMITED P.O. Box 640 HOCKESSIN, DE 19707	N/A - Imazethapyr Chemical # and Name: 128922 Imazethapyr	18-Sep-2015 GENERIC ID # GDCI-128922-1549

4. EPA Product Registration	5. I wish to cancel this product registration voluntarily	6. Generic Data		7. Product Specific Data	
		6a. I am claiming a Generic Data Exemption because I obtain the active ingredient from the source EPA registration number listed below.	6b. I agree to satisfy Generic Data Requirements as indicated on the attached form entitled "Requirements Status and Registrant's Response."	7a. My product is an MUP and I agree to satisfy the MUP requirement on the attached form entitled "Requirements Status and Registrant's Response."	7b. My product is an EUP and I agree to satisfy the EUP requirement on the attached form entitled "Requirements Status and Registrant's Response."
82633-23			X	N/A	N/A

8. Certification: I certify that the statements made on this form and all attachments are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine, imprisonment or both under applicable law.

Signature and Title of Company's Authorized Representative _____

9. Date

10. Name of Company

11. Phone Number

United States Environmental Protection Agency
Washington, D.C. 20460

REQUIREMENTS STATUS AND REGISTRANT'S RESPONSE

OMB Approval 2070-0174
EPA FORM 6300-3

INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form. Use additional sheet(s) if necessary.

1. Company Name and Address	2. Case # and Name	3. Date and Type of DCI and Number
SHARDA CROPCHEM LIMITED P.O. Box 640 HOCKESSIN, DE 19707	N/A - Imazethapyr Chemical # and Name: 128922 Imazethapyr	18-Sep-2015 GENERIC ID # GDCI-128922-1549

4. Guideline Requirement Number	5. Study Title		PROTOCOL	Progress Reports 1	2	3	6. Use Pattern	7. Test Substance	8. Time Frame (Months)	9. Registrant Response
	Nontarget Plant Protection Data Requirements (Conventional Chemical)									
850.4100	Seedling Emergence and Seedling Grow th	**(5, 23, 27)**	N				T,C,A	TEP	12	3
850.4150	Vegetative Vigor	**(5, 23, 27)**	N				T,C,A	TEP	12	3
850.4400	Aquatic Plant Toxicity Using Lemna spp	**(11, 24, 26)**	N				T,C,A	COMMENT	12	3
	Terrestrial and Aquatic Nontarget Organisms Data Requirements (Conventional Chemical)									
850.3020	Honey bee acute contact toxicity	**(2, 3, 10, 14)**	N				T,C,A	TGAI	12	3
850.3040	Field testing for pollinators	**(1, 4, 7, 13, 25)**	Y				T,C,A	TEP	24	3
SS-1108	Honey bee acute oral toxicity	**(3, 10, 12, 25)**	Y				T,C,A	TGAI	12	3

10. Certification: I certify that the statements made on this form and all attachments are true, accurate, and complete. I acknow ledge that any know ingly false or misleading statement may be punishable by fine, imprisonment or both under applicable law .

Signature and Title of Company's Authorized Representative Agent for Sharda CropChem Ltd.

11. Date 9/20/2016

12. Name of Company Sharda CropChem Limited

13. Phone Number 302-635-7289

United States Environmental Protection Agency
Washington, D.C. 20460

REQUIREMENTS STATUS AND REGISTRANT'S RESPONSE

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SS-1155	Residues in Pollen and Nectar/Field Residue Analysis **(4, 8, 18, 25)**	Y				T,C,A	TEP	24	3
SS-1228	Larval honey bee acute oral toxicity **(3, 9, 17, 20, 25)**	Y				T,C,A	TGAI	12	3
SS-1253	Larval honeybee chronic oral toxicity **(3, 9, 16, 19, 25)**	Y				T,C,A	TGAI	12	3
SS-1313	Honey bee adult chronic oral toxicity **(3, 10, 15, 25)**	Y				T,C,A	TGAI	12	3
SS-1319	Semi-field testing for pollinators (tunnel or colony feeding studies) **(4, 6, 21, 22, 25)**	Y				T,C,A	TEP	24	3